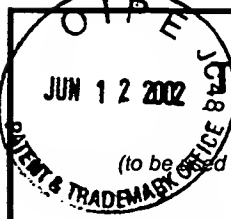


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+

COPY OF PAPERS
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PTO/SB/21 (08-00)

 TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/096,811
	Filing Date	June 12, 1998
	First Named Inventor	Mao, et al.
	Group Art Unit	2615
	Examiner Name	Chieu, P.
	Attorney Docket Number	2100977-991400
Total Number of Pages in This Submission		4

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice of Appeal
Remarks		

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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 07-1896. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

GRAY CARY WARE & FREIDENRICH LLP

Dated: June 3, 2002

By: 

Attorney Name: Peter R. Leal, Esq.

Reg. No. 24,226

Attorneys for Applicant(s)

1755 Embarcadero Road

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Attn: Patent Department

Telephone No. (916) 930-3200

Facsimile No. (916) 930-3201

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Box AF, Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: June 3, 2002

Typed or printed name Paula Borgens

Signature 

Date

June 3, 2002

**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/096,811
Filing Date	June 12, 1998
First Named Inventor	Mao, et al.
Examiner Name	P. Chieu
Group Art Unit	2615
Attorney Docket No.	2100977-991400

RECEIVED**JUN 18 2002****TOTAL AMOUNT OF PAYMENT (\$)**1240.00**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

07-1896

Deposit
Account
Name

Gray Cary Ware & Freidenrich LLP

- ☒
- Charge Any additional Fee Required
-
- Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status.
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check in the amount of \$ 1240.00**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	180	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	=
Independent Claims	-3** =	X	=
Multiple Dependent	X	=	=

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	80	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	920
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	320
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	820	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
128	180	128	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)1240**SUBMITTED BY**

Name (Print/Type)

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(Attorney/Agent)

24, 226

Telephone

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Signature

Date

June 3, 2002